CLAIMS ONLY

Application Number	Filing Date
10764978	
Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
(1)							51						
							52						
							53						
5							54						
6							(55)						
7							56						
8							57						
9							58						
10							59						
11							60						
12							61						
13							62						
14							63						
15							64						
16							65						
17							66						
18							67						
19							68						
20							69						
21							70						
22							71						
(23)							72						
24							73						
25							74						
26							75						
27							76						
28							77						
29							78						
30							79						
31							80						
32							81						
33							82						
34							83						
35							84						
36							85						
37							86						
38							87						
39							88						
40							89						
41							90						
42							91						
(43)							92						
44							93						
45							94						
46							95						
47							96						
48							97						
49							98						
(50)							99						
							100						
Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						